

P & ER
DEVELOPMENT CONTROL
REC'D 2 8 NOV 2023

County Hall Beverley East Riding of Yorkshire HU17 9BA

## Application for tree works: works to trees subject to a tree preservation order (TPO) and/or notification of proposed works to trees in a conservation area.

## Town and Country Planning Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

## Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink.

You must use this form if you are applying for work to trees protected by a tree preservation order (TPO). (You may also use it to give notice of works to trees in a conservation area).

It is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application / notice cannot proceed.

Applicant Name and Address				
Title:	MR First name: DANIEL			
Last name: RICHARDSON				
Company (optional):				
Unit:	House number: House suffix:			
House name:	PERBLE STACK HOUSE			
Address 1:	CATFOSS ROAD			
Address 2:	BEWHOLME			
Address 3:				
Town:	DRIFFIELD			
County:	EAST YORKSHIRE			
Country:	ENGLAND			
Postcode:	4025 8DX			

2. Agent Name and Address				
Title:	MR First name: TOHN			
Last name:	KERSHAW			
Company (optional):	9.7.5.			
Unit:	3 House number: House suffix:			
House name:				
Address 1:	35 EAST GATE NORTH			
Address 2:				
Address 3:				
Town:	DRIFFIELD			
County:	EAST YORKSHIRE			
Country:	ENGLAND			
Postcode:	Y0256DF			

3. Trees.Location	4. Trees Ownership
If all trees stand at the address shown in Question 1, go to Question 4. Otherwise, please provide the full address/location of the site where the tree(s) stand (including full postcode where available)	11 .
Unit: House House suffix:	Title: First name:
House name:	Last name:
Address 1:	(optional): House House
Address 2:	Unit: House suffix:
Address 3:	Address 1:
Town:	Address 2:
County:	Address 3:
Post code (if known):	Town:
If the location is unclear or there is not a full postal address, either	County:
describe as clearly as possible where it is (for example, 'Land to the rear of 12 to 18 High Street' or 'Woodland adjoining Em Poad') or	Country:
provide an Ordnance Survey grid reference:  Description:	Postcode:
	Telephone numbers
P & ER	Country code: National number: Extension number:
DEVELOPMENT CONTROL	Country code: Mobile number (optional):
REC'D 2 8 NOV 2023	Country code: Mobile number (optional):
	Country code: Fax number (optional):
TO SEE ALTERESCENCE OF THE PROPERTY OF THE PRO	
	Email address (optional):
5. What Are You Applying For?	6. Tree Preservation Order Details
Are you seeking consent for works to tree(s) Yes No	If you know which TPO protects the tree(s), enter its title or number below.
subject to a TPO?	
Are you wishing to carry out works to tree(s) In a conservation area?	=
Please identify the tree(s) and provide a full and clear specification of necessary. You might find it useful to contact an arborist (tree surgeo protected by a TPO, please number them as shown in the First Sched your sketch plan (see guidance notes). Please provide the following information below: tree species (and the rees are protected by a TPO you must also provide reasons for the wolanting replacement trees (including quantity, species, position and Eg. Oak (T3) - fell because of excessive shading and low amenity value. Full the contact of the contac	on) for help with defining appropriate work. Where trees are lule to the TPO where this is available. Use the same numbers on the number used on the sketch plan) and description of works. Where work and, where trees are being felled, please give your proposals for size) or reasons for not wanting to replant. Replant with 1 standard ash in the same place.  BUT NOT INCLUDING ANY MAJOC

7. Identification Of Tree(s) And Description Of Works continued				
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8. Trees-Additional Information				
Additional information may be attached to electronic communications or provided	separate	ely in paper	format.	
For all trees  A sketch plan clearly showing the position of trees listed in Question 7 must be provided by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a consit would also be helpful if you provided details of any advice given on site by an LPA office.  For works to trees covered by a TPO. Please indicate whether the reasons for carrying out the proposed works include any of timust be accompanied by the necessary evidence to support your proposals. (See guidant)	servation er. he follow	area (see gui	dance notes ur application	).
<ol> <li>Condition of the tree(s) - e.g. it is diseased or you have fears that it might break o         if YES you are required to provide written arboricultural advice or other         diagnostic information from an appropriate expert.</li> </ol>	or fall:	☐ Yes	T=No	
<ol> <li>Alleged damage to property - e.g. subsidence or damage to drains or drives.</li> <li>If YES you are required to provide for:</li> </ol>		Yes	T/No	
Subsidence A report by an engineer or surveyor, to include a description of damage, vand repair proposals. Also a report from an arboriculturist to support the			g data, soil, re	oots
Other structural damage (e.g. drains, walls and hard surfaces) Written technical evidence from an appropriate expert, including descript	tion of da	mage and po	ossible soluti	ons.
Documents and plans (for any tree) Are you providing separate information (e.g. an additional schedule of work for Question	7)?	┌─ Yes	T-No	
If YES, please provide the reference numbers of plans, documents, professional reports, p If they are being provided separately from this form, please detail how they are being sub		hsetc in sup	port of your	application
•				

9. Authority Employee/Member	
With respect to the Authority, I am:  (a) a member of staff  (c) related to a member of staff	Do served the are statements annivete and
(b) an elected member (d) related to an elected member	Do any of these statements apply to you?
	☐ 1e2 ☐ 1e0
If Yes, please provide details of the name, relationship and role	
	*
10. Application For Tree Works- Checklist	
Only one copy of the application form and additional informati	on (Question 8) is required. Please use the guidance and this checklist to
make sure that this form has been completed correctly and that	t all relevant information is submitted. Please note that failure to lication being rejected or delayed. You do not need to fill out this section,
Sketch Plan	
A sketch plan showing the location of all trees (see Que	estion 8)
an is a sound of contrast contrasts.	Sion 0/
For all trees (see Question 7)	
Gear identification of the trees concerned	The state of the s
A full and clear specification of the works to be carried.	out DEVELOPMENT CONTROL
- Mail and deal specification of the works to be carried	BEON CONTROL []
For worksto trees protected by a TPO (see Question 7)	REC'D 2 8 NOV 2023
Have you:	1
<ul><li>stated reasons for the proposed works?</li></ul>	Date of the state
<ul> <li>provided evidence in support of the stated reasons?in</li> </ul>	
<ul> <li>if your reasons relate to the condition of the tree(sappropriate expert</li> </ul>	s) - written evidence from an
<ul> <li>if you are alleging subsidence damage - a report b</li> </ul>	Wan appropriate engineer or surveyor
and one from an arborlculturist.	· <b>L</b>
<ul><li>in respect of other structural damage - written ted</li></ul>	hnical evidence
<ul> <li>Included all other information listed in Question 8?</li> </ul>	
14 Dedovation Trans	
11. Declaration - Trees	in this form and the accompanying plans/drawings and additional
iniormation. I/we confirm that, to the best of my/our knowledge.	any facts stated are true and accurate and any opinions given are the
genuine opinions of the person(s) giving them.  Signed - Applicant:	Or signed - Agent:
Cignota - Approvation	
Date (DD/MM/YYYY):	
24-11-2023 (This date must not be before the date of sending or hand-delivery of the form	ie rm)
12. Applicant Contact Details	13. Agent Contact Details
Telephone numbers Extensio	Telephone numbers
Country code: National number: number:	
Country code: Mobile number (optional):	Country code: Mobile number (optional):
Country code: Fax number (optional):	Country code: Fax number (optional):
, serialized (optional).	Tax number (optionar).
Email address (optional):	Etnail address (ontional):
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Hectronic communication - If you submit this form by fax or e-mail the LPA may communicate with you in the same manner. (Please see guidance notes)